MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10 529579

APPLICANT(S)

FILING DATE

01-03-08 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		2		51						
2				1			52						
3		2		1			53						
4		0		1			54						
5		6		1			55						
6		0		1			56						
7				1	2		57						
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44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		↓	1	↓	1	↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	6	←	13	←	TOTAL DEP.		←		←		←
TOTAL CLAIMS			7		14		TOTAL CLAIMS						

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